

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF DELAWARE

DONNA FOUTS, Individually and as	:	
Personal Representative of the Estate of	:	
CLAUDE DAVID HARLEY, Deceased,	:	C.A. No.: 08-425 GMS
and DANNY HARLEY	:	
	:	
Plaintiff,	:	
	:	
v.	:	
	:	
AIRSTREAM INC.; et al.,	:	
	:	
Defendants.	:	

**AFFIDAVIT OF RECEIPT OF  
FIRST NOTICE PURSUANT TO 10 DEL C. §3104**

STATE OF DELAWARE :  
: SS.  
NEW CASTLE COUNTY :

I, A. Dale Bowers, being duly sworn and deposed state that the following is true and correct to the best of my knowledge, information and belief:

1. I am the attorney for plaintiffs in the above-captioned matter.
  2. On July 2, 2008, an envelope containing a First Notice prescribed by 10 Del.C. §3104 was mailed by registered mail to defendant Yarway Corporation.
  3. On July 14, 2008, the return receipt of the First Notice was returned to the sender showing proof of delivery.
  4. Attached hereto as Exhibit "A" is the receipt which was given by the United States Post Office at the time of mailing to the person mailing the registered envelope containing the First Notice and the original return receipt which shows acceptance of the First Notice, referred to in Paragraph 2 of this Affidavit.
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A. DALE BOWERS

SWORN TO AND SUBSCRIBED before me this 18 day of July, 2008.

  
NOTARY PUBLIC

STEPHEN T. MORROW, ESQ.  
Attorney at Law  
State of Delaware  
Notarial Officer Pursuant to  
29 Del.C. §4323(a)(3)

My Commission Expires: \_\_\_\_\_

**Exhibit "A"**

**Joseph J. Rhoades, Esquire**  
**P.O. Box 874**  
**Wilmington, DE 19899-0874**

Check type of mail or service:

- ☐ Certified  
☐ COD  
☐ Delivery Confirmation  
☐ Express Mail  
☐ Insured  
☐ Recorded Delivery (International)  
☒ Registered  
☒ Return Receipt for Merchandise  
☐ Signature Confirmation

Affix Stamp Here  
 (If issued as a  
 certificate of mailing,  
 or for additional  
 copies of this bill)  
 Postmark and  
 Date of Receipt

Article Number	Addressee (Name, Street, City, State, & ZIP Code)	Postage	Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	DC Fee	SC Fee	SH Fee	RD Fee	RR Fee
1. RA 311 859 102 US	Winnebago Industries Inc., Attn: Raymond M. Beebe 605 W Crystal Lake Road Box 152 Forest City, IA 50436	<del>10.00</del> 2.02	10.00		0	0						2.20
2.												
3. RA 311 859 147 US	YARWAY CORPORATION CT Corporation System 350 North St. Paul Street Dallas, TX 75201	2.02	10.00		0	0						2.20
4.												
5. RA 311 859 116 US	YORK INDUSTRIES, INC. 303 Nassau Boulevard Garden City Park, NY 11040	2.02	10.00		0	0						2.20
6.												
7. RA 311 859 093 US	YORK PROCESS SYSTEM - FRICK 11750 Clay Road Houston, TX 77043-1179	2.02	10.00		0	0						2.20
8.												

Total Number of Pieces Listed by Sender **4**

Total Number of Pieces Received at Post Office **4**

Postmaster, Per (Name of receiving employee)

*[Signature]*

See Privacy Act Statement on Reverse

(Fouts)

Complete by Typewriter, Ink, or Ball Point Pen

UNITED STATES POSTAL SERVICE

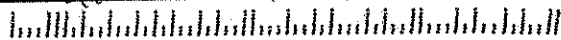

 First-Class Mail  
 Postage & Fees Paid  
 USPS  
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

 Rhoades  
 P.O. Box 874  
 Wilm., DE 19899-874

JUL 14 2008

c/o Dale Fouts



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

 YARWAY CORPORATION  
 CT Corporation System  
 350 North St. Paul Street  
 Dallas, TX 75201

 2. Article Number  
 (Transfer from service label)

RA 311 859 147 US

PS Form 3811, February 2004

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

JUL 10 2008

- ☐
- Agent
- 
- ☐
- Addressee

B. Received by (Printed Name)

RECEIVED  
CT CORPORATION

C. Date of Delivery

 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

3. Service Type

- ☐
- Certified Mail
- ☐
- Express Mail
- 
- ☒
- Registered
- ☒
- Return Receipt for Merchandise
- 
- ☐
- Insured Mail
- ☐
- C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

102595-02-M-1540